PART B - FEE(S) TRANSMITTAL

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Theodore W Olds Carlson Gaskey & Olds 400 W Maple Road				I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Suite 350	* 40000		Ī	aura Combs	$\overline{}$	(Depositor's name)	
Birmingham, M	1 48009			Taur	inla	(Signature)	
			4	8-18-0	8	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/560,259	10/560,259 12/09/2005		Fernando del Rio	60469-244 OT 5138 3306		3306	
TITLE OF INVENTION	I: LOW OVERHEAD M	ACHINE ROOMLESS	ELEVATOR CONFIGURA				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	10/31/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
SALATA, ANTHONY J		2837	187-254000				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence address form FTO/SBI 22) attached. "Fee Address" indication (or "Fee Address" Indication form FTO/SBI47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a singl registered attorney or a 2 registered patent atto	reprinting on the pastern front page, list ne names of up to 3 registered patent attorneys ents OR, alternativety, ne name of a single firm (having as a member a tiered attorney or agent) and the names of up to tistered patent attorneys or agents. If no name is no name will be printed.			
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Authorized Signature /Theodore W. Olds/			Date August 18, 2008				
Typed or printed name Theodore W. Olds			Registration No. 33,080				
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